

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

PAGE	1	OF	1
FOR SE OF FORM 24/48			

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00530766 </div>
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: flex; justify-content: flex-end; align-items: center; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">M M</div> <div style="margin: 0 5px;">/</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">D D</div> <div style="margin: 0 5px;">/</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y</div> </div>	

Full Name of Payee The Lukens Company		Date of Public Distribution/Dissemination <div> <div>MM / DD / YYYY</div> <div>10 / 07 / 2020</div> </div>	
Mailing Address 2800 Shirlington Rd		Amount <div> <div></div> <div>35948.10</div> </div>	
City Arlington	State VA	Zip Code 22206	Transaction ID : SE.-2147483487 Date of Disbursement or Obligation <div> <div>MM / DD / YYYY</div> <div>10 / 05 / 2020</div> </div>
Purpose of Expenditure Printing / Postage		Category/ Type	
Name of Federal Candidate MCSALLY, MARTHA, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		<div> <div></div> <div>254977.43</div> </div>	District: _____ State: <u>AZ</u> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ►

Full Name of Payee The Lukens Company		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 07 / 2020	
Mailing Address 2800 Shirlington Rd		Amount 35948.10	
City Arlington	State VA	Zip Code 22206	Transaction ID : SE.-2147483486 Date of Disbursement or Obligation MM / DD / YYYY 10 / 05 / 2020
Purpose of Expenditure Printing / Postage	Category/ Type		
Name of Federal Candidate KELLY, MARK, , ,	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate	District: _____ State: <u>AZ</u>
Calendar Year-To-Date Per Election for Office Sought	290925.53		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ►

(a) SUBTOTAL of Itemized Independent Expenditures.....	71896.20
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	71896.20

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gross, Jennifer, , ,

[Electronically Filed]

Date _____

Signature